1. CERTIFICATE NUMBER: 73-R-0001 CUSTOMER NUMBER: 1356

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT) Pajof2

Oklahoma State University Animal Resources Unit 101 Mc Elroy Hall Annex Stillwater, OK 74078

AT 110205 Dr. Enifret

Telephone: (405) -744-7631

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report | F. TOTAL NUMBE OF ANIMALS (COLUMNS C + D + E) |
|--|---|---|--|--|---|
| 4. Dogs | 4 | | 144 | | 144 |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | 1 | | | 1 |
| 7. Hamsters | | | | | |
| 8. Rabbits | | 16 | 43 | | 59 |
| 9. Non-human Primates | | | | , | |
| 10. Sheep | 11. | 61 | | | 61 |
| 11. Pigs | | | 40 | 4 | 40 |
| 12. Other Farm Animals | | 28 | 120 | | 164 |
| orse | | 10 | 12 | | 22 |
| 13. Other Animals | | | | | |
| attle | | 10 | 124 | | 134 |
| erret | | 2 | | | 2 |
| oat | | 8 | | | 8 - |

ASSURANCE STATEMENTS

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

- Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approximately Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

Stephen McKeever

VP for Research & Technology Transfer

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

1. REGISTRATION NO.

73-R-001

1356

FORM APPROVED OMB NO. 0579-0036

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Pg20f2

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA include Zin Codel Oklahoma State University Animal Resources Unit

101 McElroy Hall Annex Stillwater, OK 74078

170205 Dr. Ellifrid

| Animals Covered By The Animal Welfare Regulations 12. &/OR 13. Other (List by species) | B. Number of animals being bred, conditioned, or held for use in leaching, testing, experiments, research, or surgery but not yet used for such purposes. | C Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons, such drugs were not used must be attached to this report). | TOTAL NO. OF ANIMALS (Cols. C + D + E) |
|---|---|--|---|--|--|
| Pocket mouse | | 9 | | | 3 |
| W <u>ood rat</u> | | 40 | 5 | | 45 |
| Deer mouse | | 57 | 5 | | 62 |
| White footed mic | e | 263 | 23 | | 286 |
| H <u>arvest mouse</u> | | 103 | 4 | | 107 |
| C <u>otton rat</u> | | 161 | . 27 | | 188 |
| Swift fox | | | 49 | | 49 |
| Raccon | | | 8 | | 8 |
| Skunk | · | | 47 | | 47 |
| B <u>rown</u> bat | | 68 | | | 68 |
| Vole | | 5 | 3 | | 8 |
| Shrew | | 1 | 1 | | 2 |
| House mouse | | 1 | | | 1 |
| Free-tailed bat | | 20 | 10 | | 30 |
| Opossum | | 2/02/ | | | 2 |
| Texas mouse | | 7732 | 3/85 | | 3/2 |
| | | | , /0, | | W |
| | | | | | - |
| | i | . [| ! | | |

1). Professionally acceptable standards governing the care, treatment, and use of animals, including approriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2). Each principal investigator has considered alternatives to painful procedures.

Willowa

3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL

(Chief Executive Officer or Legally Responsible Institutional Official) I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

Stephen McKeever VP for Research & Technology

Transfer

DATE SIGNED

APHIS FORM 7023A (AUG 91)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

OCT 2 6 2005 *

1. CERTIFICATE NUMBER: 73-R-0002 CUSTOMER NUMBER: 8233

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

O K Med Res Foundation Lab Animal Resources Center 825 Ne 13th St Oklahoma City, OK 73104 Ellifrid

Telephone: (405) -271-7085

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS | REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A) | | | | | |
|---|--|---|--|--|--|--|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) | |
| 4. Dogs | | | | | - 0 - | |
| 5. Cats | | | | | 0 | |
| 6. Guinea Pigs | | | | | -0- | |
| 7. Hamsters | | | | | -0- | |
| 8. Rabbits | | | | | -0- | |
| 9. Non-human Primates | | | 23 | | 23 | |
| 10. Sheep | | · | | | - 0- | |
| 11. Pigs | | | | | -0- | |
| 12. Other Farm Animals | | | | | -0- | |
| | | | | | | |
| 13. Other Animals | | | | | | |
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ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual reserved teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approximate (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary involved exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| | FICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL of Executive Officer or Legally Responsible Institutional Official) | |
|--|---|-------------|
| SIGNATURE OF C.E.O. OR INSTAUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
| H DOUL IN MA | J. DONALD CAPIA MD | 10/4 |
| ADDITION TO THE TOTAL TOTAL TO THE TOTAL TO THE TOTAL TOTAL THE TOTAL TO | sich is obsolete | |

> COPY FOR YOUR INFORMATION

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 73-R-0007

> **CUSTOMER NUMBER:** 1468

FORM APPROVED OMB NO. 0579-0036

University Of Oklahoma Health Science Center P.O. Box 26901 Oklahoma City, OK 73190

Telephone: (405) -271-5185

111705 nr. Ellifrid

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|--|---|---|--|--|--|
| 4. Dogs | | 1 | 21 | | 22 |
| 5. Cats | | | 9 | | 9 |
| 6. Guinea Pigs | | | 8 | | 8 |
| 7. Hamsters | | | | | . 0 |
| 8. Rabbits | 1 | 100 | The state of the s | | 0 |
| 9. Non-human Primates | 274 | 107 | 28 | | 135 |
| 0. Sheep | | | 20 | | 20 |
| 1. Pigs | | | | | 0 |
| 2. Other Farm Animals | | | | | |
| Goats | | | 18 | | 18 |
| 3. Other Animals | | | | | 10 |
| | | | | | |
| | | | | | |
| | | | | | |

ASSURANCE STATEMENTS

- Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual reservables teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approximately Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

JOSEPH J. Ferretti, Ph.D.

Sr. Vice President and Provost

DATE SIGNED

APHIS FORM 7023 (AUG 91)

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

NOV 1 7 2005

1. CERTIFICATE NUMBER: 73-R-0010 CUSTOMER NUMBER: 1593

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

O S U College Of Osteopathic Medicine 1111 W 17th St Tulsa, OK 74107 102605 1. NENIGHT

Telephone: (918) -561-8241

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A) | | | | | |
|---|---|---|--|--|--|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | | | | | |
| 5. Cats | | | | | |
| 6. Guinea Pigs | 1 | . 0 | 0 | 0 | 0 |
| 7. Hamsters | | | | | |
| 8. Rabbits | 10 | Ö | 0 | O . | 0 |
| 9. Non-human Primates | | | | | |
| 10. Sheep | | | | · | |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | | |
| 13. Other Animals | | | | | |
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ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual reseateaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and application. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use

| 4) The attending veterinarian for this research facility has appropriate authority to | ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects | or animal care and use. |
|---|--|-------------------------|
| | HEADQUARTERS RESEARCH FACILITY OFFICIAL Officer or Legally Responsible Institutional Official) | |
| SIGNATURE OF, C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
| Ken and taging | RICHARD MANSLEY, PH.D. VICE PRESIDENT | 10/17/05 |
| APHIS FORM 7023 (Replaces VS FORM 48-23 (O)T 88), which is obsolete. |) | |
| (AUG 91) | | • 1 |

1428

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 73-R-0012

CUSTOMER NUMBER:

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Dean Mc Gee Eye Institute 608 Stanton L Young Blvd Oklahoma City, OK 73104

Dr. Ellifrid

Telephone: (405) -271-6815

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS | USED BY OR UNDER | CONTROL OF RESEAF | RCH FACILITY (Attach addition | nal sheets if necessarv or use APHIS Form 7023A) | |
|---|---|---|--|--|--|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | | | | | 0 |
| 5. Cats | | | | | 0 |
| 6. Guinea Pigs | | | | | 0 |
| 7. Hamsters | | | | | ٥ |
| 8. Rabbits | -0- | ~0- | 186 | - 0 - | 186 |
| 9. Non-human Primates | | | | | ٥ |
| 10. Sheep | | | | | 0 |
| 11. Pigs | | | , | | 0 |
| 12. Other Farm Animals | | | | | 0 |
| | | | | | 0 |
| 13. Other Animals | | | | | 0 |
| | | | | | ٥ |
| | | | | | ٥ |
| | | | | | 0 |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approximate and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inbrief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OF | FICIAL |
|--|--------|

(Chief Executive Officer or Legally Responsible Institutional Official)

UTIONAL OFFICIAL SIGNATURE

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

(AUG 91)

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

1. CERTIFICATE NUMBER: 73-R-0013

CUSTOMER NUMBER: 1421

FORM APPROVED OMB NO. 0579-0036

Immuno-Mycologics, Inc. P. O. Box 1151

Norman, OK 73070

113005 Dr. Ellifrit

Telephone: (405) -288-2383

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS | USED BY OR UNDER | CONTROL OF RESEAF | RCH FACILITY (Attach addition | al sheets if necessarv or use APHIS Form 7023A) | |
|---|---|---|--|--|--|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | X | 1 | | | |
| 5. Cats | | | / | . / | |
| 6. Guinea Pigs | | | | | |
| 7. Hamsters | | | | | |
| 8. Rabbits | 0 \$ 553 | 6 | O _n | 0 | 6 |
| 9. Non-human Primates | | \wedge | | <i>Y</i> | |
| 10. Sheep | | | | | |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | | |
| goats | \bigcirc | 17 | 0 | 0 | 17 |
| 13. Other Animals | | | | | |
| | | | | | |
| The above de | aiure were | for Sept. | 30, 2005. as | of this date (Nov) we | have |
| no animal | (all were | sold) and a | to not plan to | of this date (Now) we purches any for possibly a | year or mo |
| ASSURANCE STATEMENTS | | | | 0,0 | |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual reserved teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approximation. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| | TON BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ecutive Officer or Legally Responsible Institutional Official) | |
|---|---|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
| SIGNATURE OF CLED. ON INSTITUTIONAL OFFICIAL | Scott Bauman - Vice President | 11/21/05 |

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

(AUG 91)

NOV 2 5 2005



ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

1. CERTIFICATE NUMBER: 73-R-0014
CUSTOMER NUMBER: 1395

FORM APPROVED OMB NO. 0579-0036

Northeastern State University Biosciences Research Facility Tahlequah, OK 74464

120105 Dr. Ellifrit

Telephone: (918) -456-5511

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A) | | | | | |
|--|---|---|--|--|--|
| Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | | | | | () |
| 5. Cats | | | | | 0 |
| 6. Guinea Pigs | | | | | 0 |
| 7. Hamsters | | | | | \bigcirc |
| 8. Rabbits | | | | | $\widetilde{\bigcirc}$ |
| 9. Non-human Primates | | | | | Ŏ |
| 10. Sheep | | | | | \circ |
| 11. Pigs | | | | | $\overline{\bigcirc}$ |
| 12. Other Farm Animals | | | | | \overline{O} |
| 13. Other Animals | | | | | 0 |
| | | | | | The state of the s |
| | | | | | |
| ASSLIBANCE STATEMENT | | | | | |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary incoming the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

JANET E. BAHR, INTERIM VICE PRESIDENT
FOR ACADEMIC AFFAIRS

11/18/05

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

//

See attached form for additional information. Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 73-R-0016 CUSTOMER NUMBER: 1389

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

All redactions on this page are pursuant to (b)(6) & (b)(7

Murray State College One Murray Campus Ste Vt 100 Tishomingo, OK 73460

Telephone: (580) -371-2371

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| Α. | B. Number | | C. Number of | D. Number of animals upon | all sheets if necessary or use APHIS Form 7023A) | F. |
|---|--|--|--|---|--|-------------------------|
| Animals Covered By The Animal Welfare Regulations | being br condition held for teaching experim research | ed, ned; or use in , testing, ents, or but not ye such | animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report | TOTAL NUMBER OF ANIMALS |
| 4. Dogs | - | | | | | |
| 5. Cats | | | 2 | | | 2 |
| 6. Guinea Pigs | | | | | | |
| 7. Hamsters | | | | | | |
| 8. "Rabbits | | | | | | |
| 9. Non-human Primates | | | | | | |
| 10. Sheep | | | | 17.00 | | |
| I1. Pigs | | | | | | |
| 2. Other Farm Animals | | | | | | |
| 3. Other Animals | | | | | | |
| | | | | | | |
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| ASSURANCE STATEMENTS | | | | · · · · · · · · · · · · · · · · · · · | | <u> </u> |

- teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and app Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIA |
|---|
| (Chief Executive Officer or Legally Responsible Institutional Official) |
| |

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

(AUG 91)

OCT 1 7 2005

See reverse side for additional information.

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 73-R-0017 CUSTOMER NO. 1572

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)
 UNIVERSITY OF TULSA

UNIVERSITY OF TULSA 600 S COLLEGE AVE TULSA, OK 74104-318

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS(sites)

SITE1 TULSA, OK 74104

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report) | F. TOTAL NO. OF ANIMALS (Cois. C + D + E) |
|---|---|---|---|--|---|
| 4. Dogs | | | | | |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | | | | |
| 7. Hamsters | 62 | | | | |
| 8. Rabbits | | | | | |
| 9. Non-Human Primates | | | | | |
| 10. Sheep | | | | | |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | 777777777777777777777777777777777777777 | |
| 13. Other Animals | | | | | |
| TO, Outer Artificials | | <u></u> | | | |
| | | | | | |
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- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL | | | | | | | |
|---|--|------------|--|--|--|--|--|
| (Chief Executive Officer or Legally Responsible Institutional official) | | | | | | | |
| I certify that the above is true, correct, and complete (7 U.S.C. Section 2143) | | | | | | | |
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) DATE SIGN | | | | | | |
| Allen R. Soltow | Allen R. Soltow, Vice President for Research | 11/11/2005 | | | | | |

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION STRUCK YOUR INFORMATION

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

1. CERTIFICATE NUMBER: 73-R-0030

CUSTOMER NUMBER:

FORM APPROVED OMB NO. 0579-0036

J. Alexander . Hair Nu-Era Farms 320 N Range Rd Stillwater, OK 74074 Dr. Elli frid

Telephone: (405) -377-4132

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A) | | | | | | | |
|---|---|---|--|--|--|--|--|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) | | |
| 4. Dogs | 46 | 62 | 0 | 0 | 62 | | |
| 5. Cats | | // | | | 11 | | |
| 6. Guinea Pigs | | | | | | | |
| 7. Hamsters | | | | | | | |
| 8. Rabbits | | | | | | | |
| 9. Non-human Primates | | | , | | | | |
| 10. Sheep | | | | | , | | |
| 11. Pigs | | | | | | | |
| 12. Other Farm Animals | | | | | | | |
| | | · | | | | | |
| 13. Other Animals | | | | | | | |
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ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and app Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

J. AlexANder HAIR Invest

INFORMATION

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

1. CERTIFICATE NUMBER: 73-R-0100 CUSTOMER NUMBER: 1450

FORM APPROVED OMB NO. 0579-0036

Univ Of Oklahoma-Norman 633 Elm St Norman, OK 73019

110405 Dr. Ellifrid

Telephone: (405) -325-2077

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A) | | | | | | | |
|---|---|---|--|--|--|--|--|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS (COLUMNS | | |
| 4. Dogs | | | | | | | |
| 5. Cats | | | | | | | |
| 6. Guinea Pigs | | 8 | | | 8 | | |
| 7. Hamsters | | | | | ••••• | | |
| 8. Rabbits | | 1 | 2 | | 3 | | |
| 9. Non-human Primates | | | | | | | |
| 10. Sheep | | | | | | | |
| 11. Pigs | | | | | | | |
| 12. Other Farm Animals | | | | - | | | |
| 13. Other Animals | | | | | | | |
| Chipmunks | 2 | 65 | | | 65 | | |
| | | | | | | | |
| · · | | | | | | | |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and app Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer or Legally Responsible Institutional Official)

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

Paul B. Bell, Jr., Dean College of Arts and Sciences 1 NOV 05

APHIS FORM 7023 (AUG 91)

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)



ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

1. CERTIFICATE NUMBER: 73-R-0101 CUSTOMER NUMBER: 1439

FORM APPROVED OMB NO. 0579-0036

Ferrell Farms Inc 30140 Oklahoma St Mcloud, OK 74851

ff 120205 Dr. Ellifrid

Telephone: (405) -964-3710

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing .

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report.) | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|---|---|--|--|--|
| 4. Dogs | | | | | |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | : | | | |
| 7. Hamsters | | | | | |
| 8. Rabbits | , | | | | |
| 9. Non-human Primates | | | | | |
| 0. Sheep | 0 | 0 | 0 | 0 | 0 |
| 1. Pigs | | | | | |
| 2. Other Farm Animals | | | | | |
| X | | ~ | | | |
| 13. Other Animals | | | | | V) |
| GOATS | 0 | 7) | 0 | 0 | 7) |
| | | | | | |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and appr Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use. CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

| | (Chief Executive Officer or Legally Responsible Institutional Official) | |
|---|---|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) GARY L. FERREYL, PRES. FERREYL FARMS INC. | DATE SIGNED |

APHIS FORM 70/23

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

See reverse side for additional information.

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 73-R-0106 CUSTOMER NO. 1541

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

 HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

HANDKE FARMS RT 1 BOX D VERDEN, OK 73092

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS(sites)

| FACILITY LOCATIONS (sites) | | | | | |
|----------------------------------|--|--|--|--|--|
| HANDKE FARMS VERDEN, OK 73092 | | | | | |
| | | | | | |

| REPORT OF ANIMALS USED BY | OR UNDER CONTROL O | F RESEARCH FACILITY | (Attach additional sheets if neces | sary or use APHIS FORM 7023A) | |
|---|---|---|---|--|---|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report) | F. TOTAL NO. OF ANIMALS (Cols. C + D + E) |
| 4. Dogs | | | | | |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | · | | | |
| 7. Hamsters | | | | | |
| 8. Rabbits | | | 17 | | 17 |
| 9. Non-Human Primates | | | | | - |
| 10. Sheep | | | | | |
| 11. Pigs | ļ | | | | |
| 12. Other Farm Animals | | | | | |
| | | | | | |
| 13. Other Animals | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| ASSURANCE STATEMENTS | | | | | |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquillizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional official) I certify that the above is true, correct, and complete (7 U.S.C. Section 2143) | | | | | | |
|--|--|--|--|--|--|--|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) DATE SIG | | | | | | |
| Judy Handke, Institutional Official | | | | | | |

APHIS FORM 7023 (AUG 91)

(Replaces VS FORM 18-23 (Oct 88), which is obsolete

PART 1 - HEADQUARTERS

See attached form for additional information. Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 73-R-0107 CUSTOMER NUMBER: 1602

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Allergy Laboratories, Inc. 1005 S W Second St Oklahoma City, OK 73109

Dr. Enifrit

Telephone: (405) -235-1451

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A) | | | | | | |
|---|---|---|--|--|--|--|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) | |
| 4. Dogs | | | | | | |
| 5. Cats | | | | | | |
| 6. Guinea Pigs | | 582 | | | 582 | |
| 7. Hamsters | | | | | | |
| 8. Rabbits | | | | | | |
| 9. Non-human Primates | | | | | | |
| 10. Sheep | | | | | | |
| 11. Pigs | | | | | | |
| 12. Other Farm Animals | | | | | | |
| | | | | | | |
| 13. Other Animals | | | | | | |
| | | | | | | |
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ASSURANCE STATEMENTS

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- 2) Each principal investigator has considered alternatives to painful procedures.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| | | | | _ | | | | | | | | _ | |
|---|------|-------|-------|-------|------|-------|-------|-----|------|-------|----|----|-------|
| C | ERTI | FICAT | ION E | Y HEA | DQUA | RTERS | RESEA | RCI | Η FA | CILIT | ΥC | FF | ICIAL |
| | | | | | _ | | | | | | | | |

(Chief Executive Officer or Legally Responsible Institutional Official)

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

Richard L. Bishop, Director of QA/RA

10/24/05

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

(AUG 91)



ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

1. CERTIFICATE NUMBER: 73-R-0109
, CUSTOMER NUMBER: 1811

FORM APPROVED OMB NO. 0579-0036

Tulsa Community College 6111 East Skelly Dr Tulsa, OK 74135

Telephone: (918) -595-8212

AT 113005 Dr. Ellifrit

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F. TOTAL NUMBEF OF ANIMALS (COLUMNS C + D + E) |
|---|---|---|--|--|--|
| 4. Dogs | 0 | 0 | 20 | 0 | 20 |
| 5. Cats | 0 | 0 | 17 | 0 | 17 |
| 6. Guinea Pigs | 0 | 0 | 4 | 0 | 4 |
| 7. Hamsters | 0 | 4 | 0 | 0 | 4 |
| 8. Rabbits | 0 | 2 | 2 | 0 | 4 |
| 9. Non-human Primates | 0 | 0 | 0 | 0 | 0 |
| 10. Sheep | 0 | 0 | 0 | 0 | . 0 |
| 11. Pigs | 0 | 0 | 0 | 0 | 0 |
| 12. Other Farm Animals | 0 | 0 | 0 | 0 | 0 |
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| 13. Other Animals | 0 | , 0 | 0 | 0 | 0 |
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ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual reserved teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approximation. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.
- A) The attending retained on this receives facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official) | | | | | | |
|---|---|-------------|--|--|--|--|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) Thomas K. McKeon | DATE SIGNED | | | | |
| Ment Call | President & CEO | 11/21/05 | | | | |

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

(ÀUG 91)

See attached form for additional information. Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH (TYPE OR PRINT)

1. CERTIFICATE NUMBER: 73-R-0112 CUSTOMER NUMBER: 10214

FORM APPROVED OMB NO. 0579-0036

Oklahoma State University At Oklahoma City 900 N Portland Oklahoma City, OK 73107

Telephone: (405) -945-3364

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

Oklahoma State University- FACILITY LOCATIONS (Sites) - See Atached Listing Oklahoma City

900 N. Portland Oklahoma City, OK

73107

| REPORT OF ANIMALS | USED BY OR UNDER (| CONTROL OF RESEAR | CH FACILITY (Attach additiona | ll sheets if necessarv or use APHIS Form 7023A) | |
|---|---|---|--|--|--|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | | Rows 4 th | rough 13 inten | tionally left blank. | |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | Please se | e cover letter | • | - AMANANA |
| 7. Hamsters | | | | | |
| 8. Rabbits | | | | | - N. P. |
| 9. Non-human Primates | | | | | |
| 10. Sheep | | | · | | \u00e4 |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | | |
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| 13. Other Animals | | | | | |
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| ASSURANCE STATEMENTS | · | | | | |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and appropriate that exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in the standards and regulations be specified and explained by the principal investigator and appropriate that the standards and regulations be specified and explained by the principal investigator and appropriate that the standards and regulations be specified and explained by the principal investigator and appropriate that the standards and regulations be specified and explained by the principal investigator and appropriate that the standards and regulations be specified and explained by the principal investigator and appropriate that the standards and regulations be specified and explained by the principal investigator and appropriate that the standards are standards and regulations are standards and regulations be specified and explained by the principal investigator and appropriate the standards and regulations are standards are standards are standards are standards are standards are standards are standards. brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| | EADQUARTERS RESEARCH FACILITY OFFICIAL cer or Legally Responsible Institutional Official) | |
|---|--|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) OSU - O W Derry arroll res | DATE SIGNED |
| APHIS FORM 70x3 (Replaces VS FORM 18-23 (OCT 88), which is obsolete.) (AUG 91) | | |

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NO. 73-R-0112

FORM APPROVED OMB NO. 0579-0036

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA include Zin Code)
OKIANOMA State University-OKC

900 N. Portland Oklahoma City, OK 73107

Tel: 405-945-3364

| REPORT OF ANIMALS USED BY O | | F RESEARCH FACILITY | f (Attach adiditional sheets if ne | cessary or use this form.) | |
|---|---|--|---|---|---|
| A. Animals Covered By The Animal Welfare Regulations 12. &/OR 13. Other (List by species) | B. Number of animals being bred, conditioned, or held for use in leaching, testing, experiments, research, or surgery but not yet used for such purposes. | C Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report). | TOTAL NO. OF ANIMALS (Cols. C + D + E) |
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- 1). Professionally acceptable standards governing the care, treatment, and use of animals, including approriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2). Each principal investigator has considered alternatives to painful procedures.
- 3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL |
|--|
| (Chief Executive Officer or Legally Responsible Institutional Official) |
| I certify that the above is true, correct, and complete (7 U.S.C. Section 2143). |

NOV 2 5 2005

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAMES TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (TYPE OF PRINT)

DATE SIGNED

Jerry D. Carroll

APHIS FORM 7023A (AUG 91)

ASSURANCE STATEMENTS

PART 1 - HEADQUARTERS

See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 73-R-0113

CUSTOMER NUMBER: 14231

OMB NO. 0579-0036

FORM APPROVED

Saint Francis Hospital 6161 So Yale Ave Tulsa, OK 74136

Dr. Ellifrid

Telephone: (918) -494-1805

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS | USED BY OR UNDER | CONTROL OF RESEAR | RCH FACILITY (Attach addition | nal sheets if necessary or use APHIS Form 7023A) | |
|---|---|---|--|---|--|
| Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquilitz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | - | | 16 | _ | 16 |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | · | | | |
| 7. Hamsters | | | | | |
| 8. Rabbits | · | | | | |
| 9. Non-human Primates | | | | · | |
| 10. Sheep | | | | | |
| 11. Pigs | , | | | | |
| 12. Other Farm Animals | | | | | |
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| 13. Other Animals | | | | | |
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ASSURANCE STATEMENTS

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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

Denu

VP, Patient Care fervice

10/21/05

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

(AUG 91)

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